FORM NLRB-501 (3-21)

UNITED STATES OF AMERICA NATIONAL LABOR RELATIONS BOARD CHARGE AGAINST EMPLOYER

DO NOT WRITE IN THIS SPACE		
Case	Date Filed	
28-CA-284740	10/18/2021	

INSTRUCTIONS:

File an original with NLRB Regional Director for the Region in which the alleged unfair labor practice occurred or is occurring

1. EMPLOYER AGAINST WHOM CHARGE IS BROUGHT			
a. Name of Employer Rehoboth McKinley Christian Health Care Services		b. Tel. No. (505) 863-7001	
		c. Cell No.	
		f. Fax No.	
d. Address (Street, city, state, and ZIP code)	e. Employer Representative	g. e-Mail dsmithburg@rmchcs.org	
1901 Red Rock Drive Gallup, NM 87301	Don Smithburg	h. Number of workers employed 25	
. Type of Establishment (factory, mine, wholesaler, etc.)	j. Identify principal product or service		
Acute Hospital	Healthcare Facility		
The above-named employer has engaged in and is engaging in unfair labor practices within the meaning of section 8(a) , subsections (1) , (3) (4) and (5) of the National Labor Relations Act, and these unfair labor practices are practices affecting commerce with the meaning of the Act, or these unfair labor practices are practices affecting commerce within the meaning of the Act and the Postal Reorganization Act.			
2. Basis of the Charge (set forth a clear and concise statement of the facts constituting the alleged unfair labor practices) Within in the last few days the above-named employer has retaliated against employees on account of Union and/or protected activity. The employer has as part of an overall campaign of unfair labor practices threatened employees for their participation in protected concerted activity. The employer has also retaliated against them because they gave testimony and/or participated in NLRB proceedings. The employer did not bargain the decision to discpline the employees			
3. Full name of party filing charge (if labor organization, give full name, including local name and number)			
Union of American Physicians & Dentists 4a. Address (Street and number, city, state, and ZIP code) 4b. Tel. No.			
		(b) (6), (b) (7)(C)	
Sacramento, CA 95814		4c. Cell No. (b) (6), (b) (7)(C)	
		4d. Fax No.	
		4e. e-Mail ^{(0)(6), (0)(7)} <mark>@uapd.org</mark>	
5. Full name of national or international labor organization of which it is an affiliate or constituent unit (to be filled in when charge is			
filed by a labor organization) American Federation of Stte, County & Municipal Employees, AFL-CIO			
6. DECLARATION		Tel. No. (510) 337-1001	
I declare that I have read the above charge and that the statements are true to the best of my knowledge and belief.		Office, if any, Cell No.	
Dans Araufold	DAVID A. ROSENFELD	Fax No. (510) 337-1023	
(signature of representative or person making charge)	(Print/type name and title or office, if any)	e-Mail	
Address: Weinberg Roger & Rosenfeld 1375 55 th Street Emeryville, CA 94608	October 18, 2021 (date)	nlrbnotices@unioncounsel.net drosenfeld@unioncounsel.net	

WILLFUL FALSE STATEMENTS ON THIS CHARGE CAN BE PUNISHED BY FINE AND IMPRISONMENT (U.S. CODE, TITLE 18, SECTION 1001)
PRIVACY ACT STATEMENT

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